Image# 14978213913 PAGE 1 / 13

## **FEC** FORM 3X

## **REPORT OF RECEIPTS** AND DISBURSEMENTS For Other Than An Authorized Committee

	ror Other	IIIaII AII	Authorized	Committee	ee		Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR	PRINT ▼		mple: If typion the lines.	ng, type	12FE4M5	
, WARRIORS FOR LIB	BERTY						
ADDRESS (number and street)	2776 S A	ARLINGTON N	/ILL DR #806				
Check if different							
than previously reported. (ACC)	ARLING	STON				VA	22206
2. FEC IDENTIFICATION N	IUMBER ▼		CITY 🛦		S	STATE 🛦	ZIP CODE ▲
C C00545087			3. IS THIS REPORT	$\sim$	NEW (N) <b>OR</b>	AN (A)	MENDED
4. TYPE OF REPORT (Choose One)		nthly oort	Feb 20 (M2)		May 20 (M5)	Aug	20 (M8) Nov 20 (M11 (Non-Election Year Only)
(a) Quarterly Reports:	Due	e On:	Mar 20 (M3)		Jun 20 (M6)	-	20 (M9) Dec 20 (M12 (Non-Election Year Only)
April 15		Ш	Apr 20 (M4)	Ш	Jul 20 (M7)	Oct	20 (M10) Jan 31 (YE)
Quarterly Report ( July 15	(c)	12-Day  PRE-Electio		Primary (12F	P)	General	(12G) Runoff (12R)
Quarterly Report (	(Q2)	Report for the		Convention (	(12C)	Special (	12S)
Cotober 15 Quarterly Report (	(Q3)			M M /	D D /	Y   Y   Y   Y	to the
January 31 Year-End Report (	(YE)	E	Election on	W = W /			in the State of
July 31 Mid-Year Report (Non-electi Year Only) (MY)	on (d)	30-Day POST-Electi		General (300	G)	Runoff (3	Special (30S)
Termination Repor	t	Report for the	ne:	M M /	D D /	Y	in the
(TER)		E	Election on		L.		State of
	07 0°		014	through	M M M 09	/ 30 /	2014
I certify that I have examined t	this Report a	and to the be	est of my kno	wledge and	belief it is true	e, correct and	d complete.
Type or Print Name of Treasur	-	B MACKENZI	-				
Signature of Treasurer SCC	OTT B MACKE	ENZIE		[Electronicall	y Filed] Da	ate 10	/ D D / Y Y Y Y Y Y Y 14 2014
					_		
NOTE: Submission of false, erro	neous, or inc	omplete infor	mation may su	bject the per	son signing thi	s Report to the	ne penalties of 2 U.S.C. §437g.
Office Use							FEC FORM 3X Rev. 12/2004
Only							

OF F FEC Form 3X (Rev. 02/2003)	SUMMARY PAGE RECEIPTS AND DISBURSEMENTS	Page <b>2</b>
Write or Type Committee Name WARRIORS FOR LIBERTY		
WARRIOTO FOR EIBERTT		
Report Covering the Period: From: 07	01 / Y Y Y Y Y Y TO:	09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
S. (a) Cash on Hand  January 1,  2014		19254.21
(b) Cash on Hand at Beginning of Reporting Period	2689.11	
(c) Total Receipts (from Line 19)	70.00	78081.56
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	2759.11	97335.77
7. Total Disbursements (from Line 31)	1216.23	95792.89
3. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1542.88	1542.88
Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D)	167464.93	
This committee has qualified as a multicandic	date committee. (see FEC FORM 1M)	
For	further information contact:	
F	ederal Election Commission 999 E Street, NW Washington, DC 20463	
	T !! F	

Toll Free 800-424-9530 Local 202-694-1100

### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

## WARRIORS FOR LIBERTY

I. Receipts	I. Receipts COLUMN A Total This Period	
. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	0.00	17466.00
(i) Itemized (use Schedule A)	0.00	17466.00
(1) 11 11 11 11	70.00	57445 AG
(ii) Unitemized	70.00	57445.40
(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	70.00	74911.40
Lines IT(a)(i) and (ii)	, , , , , ,	
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry	70.00	74044.40
Totals to Line 33, page 5)	70.00	74911.40
2. Transfers From Affiliated/Other	0.00	0.00
Party Committees	0.00	0.00
3. All Loans Received	0.00	3170.16
. All Loans Heceived		
Lean Panaymenta Pagaiyad	0.00	0.00
Loan Repayments Received     Offsets To Operating Expenditures	0.00	0.00
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
5. Refunds of Contributions Made	7	
to Federal Candidates and Other		
Political Committees	0.00	0.00
'. Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
3. Transfers from Non-Federal and Levin Funds	,	
(a) Non-Federal Account	0.00	0.00
(from Schedule H3)	0.00	0.00
	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
(c) Total Translets (add To(a) and To(b))	0.00	0.00
. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	70.00	78081.56
. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	70.00	78081.56

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	II. Disbursements COLUMN A Total This Period	
Operating Expenditures: —	Total Tills I criod	Calendar Year-to-Date
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
	0.00	0.00
(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00
(b) Other Federal Operating  Expenditures	91.63	93868.29
(c) Total Operating Expenditures	7	, , , ,
(add 21(a)(i), (a)(ii), and (b))▶	91.63	93868.29
Transfers to Affiliated/Other Party		
CommitteesContributions to	1124.60	1124.60
Federal Candidates/Committees and Other Political Committees	0.00	0.00
Independent Expenditures		
(use Schedule E)	0.00	0.00
Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0.00	
(use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	200.00
	0.00	0.00
Loans Made	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
man rondeal Committees	0.00	
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))▶	0.00	0.00
(add Eiliob 25(a), (b), alid (0),		
Other Disbursements	0.00	600.00
Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity		
(from Schedule H6)	0.00	0.00
(i) Federal Share		
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely		
With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add		
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	1216.23	95792.89
25, 2 ., 25, 25, 27, 25(d), 25 and 55(5))	1210.20	93/92.08
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	1216.23	95792.89

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	70.00	74911.40
Total Contribution Refunds     (from Line 28(d))	0.00	0.00
6. Net Contributions (other than loans) (subtract Line 34 from Line 33)	70.00	74911.40
. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	91.63	93868.29
Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
. Net Operating Expenditures (subtract Line 37 from Line 36)	91.63	93868.29

## ľ

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 6 OF 13			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only			
	Detailed Summary Page	X 21b 27	22 23 24 28a 28b 28c	25 26 29 30b	
Any information copied from such Reports and Stater	nents may not be sold or us				
or for commercial purposes, other than using the nan					
NAME OF COMMITTEE (In Full)					
$\rangle$ WARRIORS FOR LIBERTY					
Full Name (Last, First, Middle Initial)					
A. FIRST VIRGINIA COMMUNITY BA	NK		Date of Disbursement		
			M M / D D / Y	YYY	
Mailing Address 11325 RANDOM HILLS DR			07 01	2014	
City	State Zip Code				
FAIRFAX	VA 22030		Transaction ID : SB21B.	17968	
Purpose of Disbursement					
SERVICE CHARGE		001	Amount of Each Disbursen	nent this Period	
Candidate Name WARRIORS FOR LIBERTY		Category/		10.80	
Office Sought: House Disburser	nent For:	Туре			
Senate Senate	Primary General				
President	Other (specify) ▼				
State: District:					
Full Name (Last, First, Middle Initial)	ANUZ		Data of Diahura		
B. FIRST VIRGINIA COMMUNITY BA	AINK		Date of Disbursement	V	
Mailing Address 11325 RANDOM HILLS DR			07 08 Y	2014	
,	State Zip Code		Transaction ID : SB21B.	17969	
FAIRFAX Purpose of Disbursement	VA 22030				
CUSTOM CREDIT BILLING		001	Amount of Each Disbursen	nent this Period	
Candidate Name		Category/		2F F0	
WARRIORS FOR LIBERTY		Type		25.50	
Office Sought: House Disburser Senate	nent For:  Primary General				
President	Other (specify)				
State: District:					
Full Name (Last, First, Middle Initial)					
C. FIRST VIRGINIA COMMUNITY BA	NK		Date of Disbursement		
Mailing Address 44205 BANDOM LINE O BB			07 08 Y	2014	
Mailing Address 11325 RANDOM HILLS DR			07 08	2014	
City	State Zip Code		Transaction ID : SB21B.	17070	
FAIRFAX	VA 22030		Hansaction in : 3021B.	11310	
Purpose of Disbursement MERCHANT SERVICE CHARGE		001			
Candidate Name			Amount of Each Disbursen	nent this Period	
WARRIORS FOR LIBERTY		Category/ Type		55.33	
Office Sought: House Disburser	nent For:				
Senate	Primary General				
State: President	Other (specify) ▼				
State: District:					
SUBTOTAL of Disbursements This Page (optional)				91.63	
TOTAL This Period (last page this line number only)			1	91.63	

SCHEDULE B (FEC Form 3X)		T FOR LINE	NUMBER: PAGE 7 OF 13	
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	FOR LINE (check only	NOMBER:	
II EINIIZED DISDUKSEINIEN IS	for each category of the	21b	X 22 23 24 25 26	
	Detailed Summary Page	27	28a 28b 28c 29 30k	
Any information copied from such Reports and Stater	nents may not be sold or use	d by any perso	on for the purpose of soliciting contributions	
or for commercial purposes, other than using the nan	ne and address of any politica	I committee to	solicit contributions from such committee.	
NAME OF COMMITTEE (In Full)				
WARRIORS FOR LIBERTY				
/ Full Name (Last, First, Middle Initial)				
A. VETERANS VICTORY FUND			Date of Disbursement	
VETERANS VICTOR 11 OND			M M / D D / Y Y Y Y	
Mailing Address 2776 S ARLINGTON MILL DR			07 09 2014	
NUM 806				
	State Zip Code VA 22206		Transaction ID : SB22.17971	
ARLINGTON Purpose of Disbursement	VA 22200			
AFFILIATED TRANSFER		008	Amount of Each Disbursement this Period	
Candidate Name		Category/		
WARRIORS FOR LIBERTY		Type	1124.60	
Office Sought: House Disburser				
Senate	Primary General			
State: District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
B.			Date of Disbursement	
			M M / D D / Y Y Y Y	
Mailing Address				
City	State Zip Code			
Purpose of Disbursement				
			Amount of Each Disbursement this Period	
Candidate Name		Category/		
		Туре		
Office Sought: House Disburser				
Senate President	Other (anality) General			
State: District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
C.			Date of Disbursement	
			M M / D D / Y Y Y	
Mailing Address				
O:h.	Ohaha Zin Cada			
City	State Zip Code			
Purpose of Disbursement				
			Amount of Each Disbursement this Period	
Candidate Name		Category/		
000		Type		
Office Sought: House Disburser Senate	nent For:  Primary General			
President	Other (specify)			
State: District:	(opoo)/ ▼			
SUBTOTAL of Disbursements This Page (optional)			1124.60	
TOTAL This Period (last page this line number only)			1124.60	

# SCHEDULE C (FEC Form 3X) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 8 OF 13

FOR LINE 13 OF FORM 3X

		Detailed Summary Page FOR LINE 13 OF FC	JRIVI 3X
ME OF COMMITTEE (In Full)		Transaction ID : SC/10.17726	
ARRIORS FOR LIBERTY			
LOAN SOURCE Full Name (Last, Firs HON KIERAN LALOR	t, Middle Initial)	Election: Primary General	
Mailing Address 105 STONY BROOK RE	)	Other (specify)	
City FISHKILL	State NY ZIP (	Ode 12524	
Original Amount of Loan	Cumulative Payment	To Date Balance Outstanding at Close of	This Perio
500.00		200.00	00.00
TERMS  Date Incurred	Date Du	e Interest Rate Secure	 ed:
01 28 7 2014	M M / D D / UF	ON DEMAND 0.00 % (apr)	es 🔀 No
List All Endorsers or Guarantors (if a			
1. Full Name (Last, First, Middle Initia	l)	Name of Employer	
Mailing Address		Occupation	
City Sta	ite ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City Sta		Amount Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City Sta	te ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City Sta	ite ZIP Code	Amount Guaranteed Outstanding:	
JBTOTALS This Period This Page (option	onal)		00.00
OTALS This Period (last page in this line	e only)	<b>&gt;</b>	
arry outstanding balance only to LINE 3	3, Schedule D, for this line.	If no Schedule D, carry forward to appropriate line of S	 Summarv.

# SCHEDULE C (FEC Form 3X) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

		Detailed Sur	mmary Page	FOR LINE 13 OF F	ORM 3X
AME OF COMMITTEE (In Full)			Transa	ction ID : SC/10.17727	
VARRIORS FOR LIBERTY					
LOAN SOURCE Full Name (Last, First,	, Middle Initial)		E	Election:	
HON KIERAN LALOR	,			Primary	
				General	
Mailing Address 105 STONY BROOK RD				Other (specify) ▼	
City FISHKILL	State NY ZIP Co	ode 12524			
Original Amount of Loan	Cumulative Payment To	Date	Balanc	e Outstanding at Close of	This Period
2270.16	7	0.00	П	2	270.16
TERMO		,			
TERMS Date Incurred	Date Due	· I	nterest Rate	Secui	red:
01 28 2014	M M / D D / Y	ON DEMAND	0.00		<b>V</b> N.
20 2014		SIN BEININ IND		% (apr)	res X No
List All Endorsers or Guarantors (if ar	y) to Loan Source				
1. Full Name (Last, First, Middle Initial)		Name of Emp	loyer		
Mailing Address		Occupation			
		Amount			
City Stat	e ZIP Code	Guaranteed			
		Outstanding:		7	
2. Full Name (Last, First, Middle Initial)		Name of Emp	loyer		
Mailing Address		Occupation			
Walling Address		Occupation			
		Amount			
City State	e ZIP Code	Guaranteed			.
		Outstanding:	,		
3. Full Name (Last, First, Middle Initial)		Name of Emp	loyer		
Mailing Address		Occupation			
		Amount			
City	e ZIP Code	Guaranteed Outstanding:			
4. Full Name (Last, First, Middle Initial)		Name of Emp	lover	·	
7. Full Name (East, First, Wildle Hittal)		Name of Linp	loyer		
Mailing Address		Occupation			
		Amount			
City State	e ZIP Code	Guaranteed Outstanding:			
		Outotariang.			
LIPTOTAL C. This Deviced This Device (entire	mal)			2	270.16
UBTOTALS This Period This Page (option	iaij		<u>-</u>		
OTALS This Period (last page in this line	only)		<b>.</b>		
Power outotonding belongs and to LIME O	Cohodulo D. for this line of	i no Cobodula D		id to appropriate line of	Cura ma =
arry outstanding balance only to LINE 3,	Schedule D, for this line. If	no achedule D	, carry forwar	u to appropriate line of	ouninary

OF 13

PAGE

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# SCHEDULE C (FEC Form 3X) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

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FOR LINE 13 OF FORM 3X

	Detailed Sulfilliary Page 1 311 2112 13 31 1 3111 31
AME OF COMMITTEE (In Full)	Transaction ID : SC/10.17728
WARRIORS FOR LIBERTY	
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election:
HON KIERAN LALOR	Primary
	General
Mailing Address	Other (specify) ▼
Mailing Address 105 STONY BROOK RD	Other (specily)
City FISHKILL State NY ZII	P Code <sub>12524</sub>
Original Amount of Loan Cumulative Payme	nt To Date Balance Outstanding at Close of This Period
400.00	0.00 400.00
100.00	100.00
TERMS Date Incurred Date	Due Interest Rate Secured:
Man / Dad / Yayayay Man / Dad /	V V V
02 12 2014	UPON DEMAND 0.00 % (apr) Yes No
List All Endorsers or Guarantors (if any) to Loan Source	
1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
maining riddiood	Coodpation
	Amount
City State ZIP Code	Guaranteed
O Full Name (Lost First Middle Initial)	Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
0.1	Amount
City State ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed
2 3333	Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	- Company
	Amount
City State ZIP Code	Guaranteed
	Outstanding:
	·
IIDTOTALS This Daving This Dags (antional)	400.00
UBTOTALS This Period This Page (optional)	
OTALS This Period (last page in this line only)	
Carry outstanding balance only to LINE 3, Schedule D, for this lin	ne. If no Schedule D, carry forward to appropriate line of Summary.

### SCHEDULE D (FEC Form 3X) **DEBTS AND OBLIGATIONS**

**Excluding Loans** 

(Use separate schedule(s) for each numbered line)

PAGE FOR LINE NUMBER: (check only one)

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OF

13

**X** 10 NAME OF COMMITTEE (In Full) WARRIORS FOR LIBERTY A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **DIRECT MAIL - CREATIVE** BASE CONNECT INC Mailing Address 1155 - 15TH STREET NW SUITE 410 State Zip Code DC WASHINGTON 20005 Transaction ID: SD10.15376 Outstanding Balance Beginning This Period 26611.21 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 26611.21 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): DATA PROCESSING CENTURY DATA SYSTEMS CORP Mailing Address 1155 - 15TH STREET NW SUITE 410 City State Zip Code WASHINGTON DC 20005 Outstanding Balance Beginning This Period Transaction ID: SD10.17704 1100.30 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 1100.30 0.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **DIRECT MAIL - PRINTING & MAILSHOP** COLORTREE GROUP Mailing Address 8000 VILLA PARK DR City State Zip Code **RICHMOND** 23228 VA Transaction ID: SD10.15387 Outstanding Balance Beginning This Period 8258.10 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 8258.10 0.00 35969.61 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

# SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 12 OF
FOR LINE NUMBER:
(check only one)

	9
X	10

13

NAME OF COMMITTEE (In Full)
WARRIORS FOR LIBERTY

1		Nature of Debt (Purpose):			
	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor				
CONSOLIDATED MAILING SE	DIRECT MAIL - PRINTING & MAILSHOP				
Mailing Address 504 SHAW RD					
City State	Zip Code	$\dashv$			
STERLING	VA 20166				
Outstanding Balance Beginning This Period		Transaction ID : SD10.15388			
44099.15					
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period			
0.00	0.00	44099.15			
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of Debt (Purpose):			
DONOR BUREAU		LIST ENHANCEMENT			
Mailing Address 1900 NORTH CULPEPPER ST					
City State	Zip Code				
ARLINGTON	VA 22207				
Outstanding Balance Beginning This Period		Transaction ID: SD10.15390			
1243.25					
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period			
0.00	0.00	1243.25			
C. Full Name (Last, First, Middle Initial) of Debto	r or Creditor	Nature of Debt (Purpose): DIRECT MAIL - PRINTING & MAILSHOP			
Mailing Address 22695 COMMERCE CENTER C	Т				
City	State Zip Code				
DULLES	VA 20166				
Outstanding Balance Beginning This Period		Transaction ID: SD10.15389			
11058.32					
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period			
0.00	0.00	11058.32			
SUBTOTALS This Period This Page (optional)	<b>&gt;</b>	56400.72			
TOTALS This Period (last page this line number	only)				
TOTAL OUTSTANDING LOANS from Schedule (	C (last page only)				
ADD 2) and 3) and carry forward to appropriate	line of Summary Page (last page only) ▶				
,,,					

## SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 13
FOR LINE NUMBER: (check only one)

9 **X** 10

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13 OF

NAME OF COMMITTEE (In Full) WARRIORS FOR LIBERTY A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **DIRECT MAIL - PRINTING & MAILSHOP** LEGACY LIST MARKETING INC Mailing Address 1155 - 15TH STREET NW SUITE 410 State Zip Code WASHINGTON 20005 Transaction ID: SD10.15391 Outstanding Balance Beginning This Period 68124.44 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 68124.44 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **CONSULTING - COMPLIANCE** MACKENZIE & COMPANY Mailing Address 2776 S ARLINGTON MILL DR #806 City State Zip Code **ARLINGTON** 22206 VA Outstanding Balance Beginning This Period Transaction ID: SD10.17710 4000.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 4000.00 0.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Payment This Period Amount Incurred This Period Outstanding Balance at Close of This Period 72124.44 1) SUBTOTALS This Period This Page (optional)..... 164494.77 2) TOTALS This Period (last page this line number only)..... 2970.16 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 167464.93 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶